



Republic of the Philippines
VISAYAS STATE UNIVERSITY
Visca, Baybay City, Leyte

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)	(Middle)
FARMI	Garcia	Pastor	Pasturan
3. DATE OF FILING	4. POSITION	5. SALARY (Monthly)	
11/03/2022	Associate Professor IV		

6. DETAILS OF APPLICATION**6.a TYPE OF LEAVE TO BE AVAILED OF:**

- ☐ Adoption
☒ Mandatory/Force
☐ Maternity
☐ Maternity - 7 days Transferable to father/alternate caregiver
☐ Maternity - additional 15 days for single mother
☐ Monetization
☐ Parental (Solo Parent)
☐ Paternity
☐ Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)
☐ Sabbatical
☐ Sick
☐ Special Emergency (Calamity)
☐ Special Leave Benefits for women
☐ Special Leave Privilege
☐ Study
☐ VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)
☐ Vacation

Others: _____

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:

- ☐ Within the Philippines :
☐ Abroad (Pls. Specify) :

In case of Sick leave:

- ☐ In Hospital (Pls. Specify) :
☐ Out Patient (Pls. Specify) :

In case of Special Leave Benefits for Women:
(Specify Illness)

In case of Study leave:

- ☐ BAR/Board Examination Review
☐ Completion of Master's Degree
☐ Completion of Doctorate Degree
☐ Completion of PHD Degree

Other purpose:

- ☐ Monetization of Leave Credits
☐ Terminal Leave

6.c NUMBER OF WORKING DAYS APPLIED FOR1 day

Inclusive Dates

11/07/2022 - 11/07/2022

6.d COMMUTATION

- ☒ Requested ☐ Not Requested

GARCIA, PASTOR P.

(Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION**7.a CERTIFICATION OF LEAVE CREDITS**AS of: November 2022

	Vacation Leave	Sick Leave
Total Earned	14.255	299.794
Less this Application	1	
Balance	13.255	299.794

REGINA C. BIBERA

Office of the Head of Payroll and Leave Benefits

7.b RECOMMENDATION:

- ☒ For Approval
☐ For Disapproval due to:

DHENBER C. LUSANTA

Ecological Farm Resource & Management Institute

7.c APPROVED FOR:

1 day(s) with pay ___ day(s) without pay
 Others (Specify):

7.d DISAPPROVED due to:**EDGARDO E. TULIN**

(Printed Name and Signature)
University President